

Children's Cabinet

January 16, 2020

Agenda

- Welcome, Introductions, Approval of Minutes (5 min)
- DCYF Strategy Update(40 min)
- RI Pre-K Expansion and Early Childhood Governance (20 min)
- Public Comment (15 min)

DCYF Strategy Update

Children's Cabinet

1/16/20

Agenda

DCYF overview

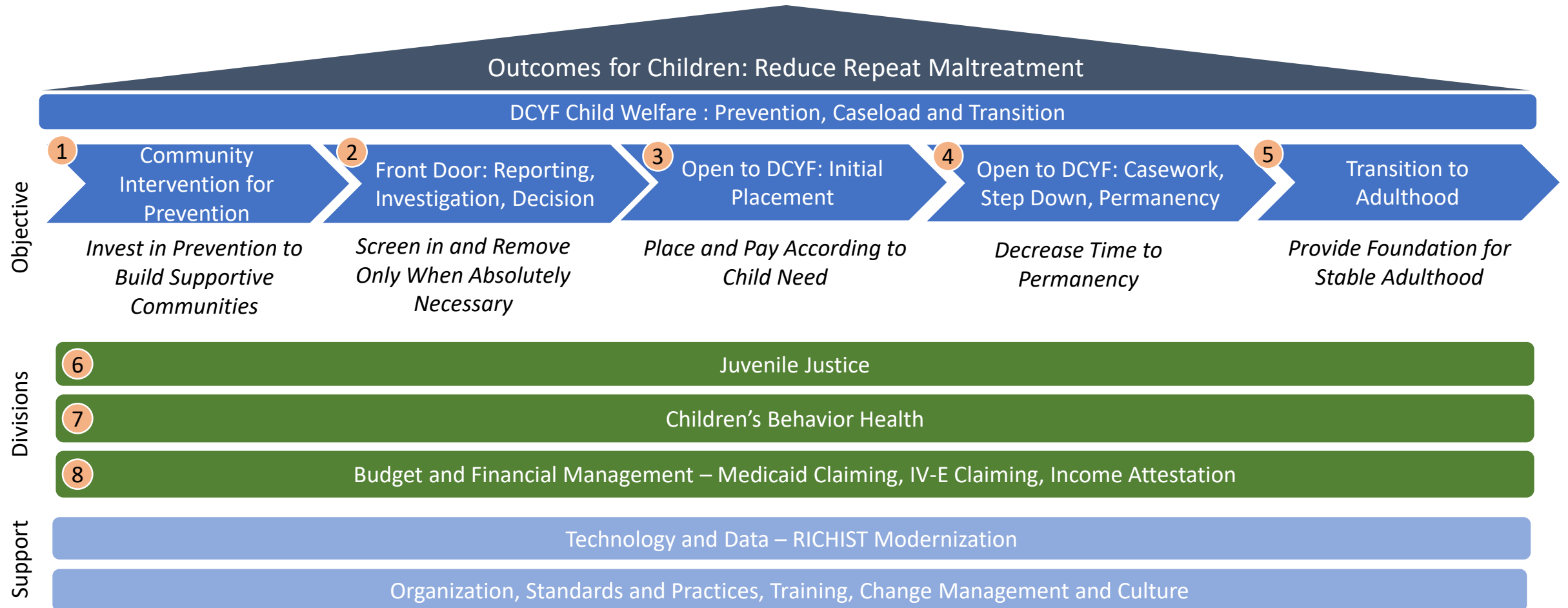
Back to Basics – Doubling down on what works

- Right response
- Right placement
- Right goal

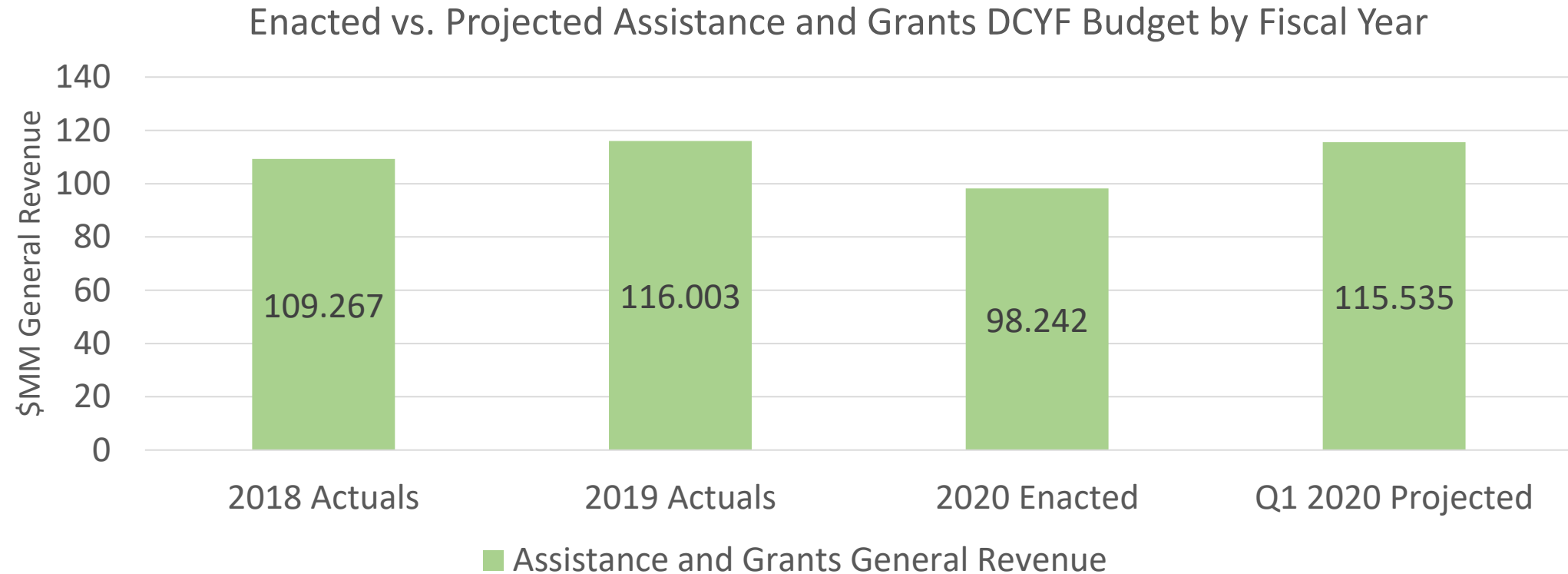
Overview

Our “Back to Basics” strategy

Right Response, Right Placement, Right Goal, Right Time



Enacted budget for placements decreased by \$17.76M; Initial projections for 2020 inline with 2019 actuals

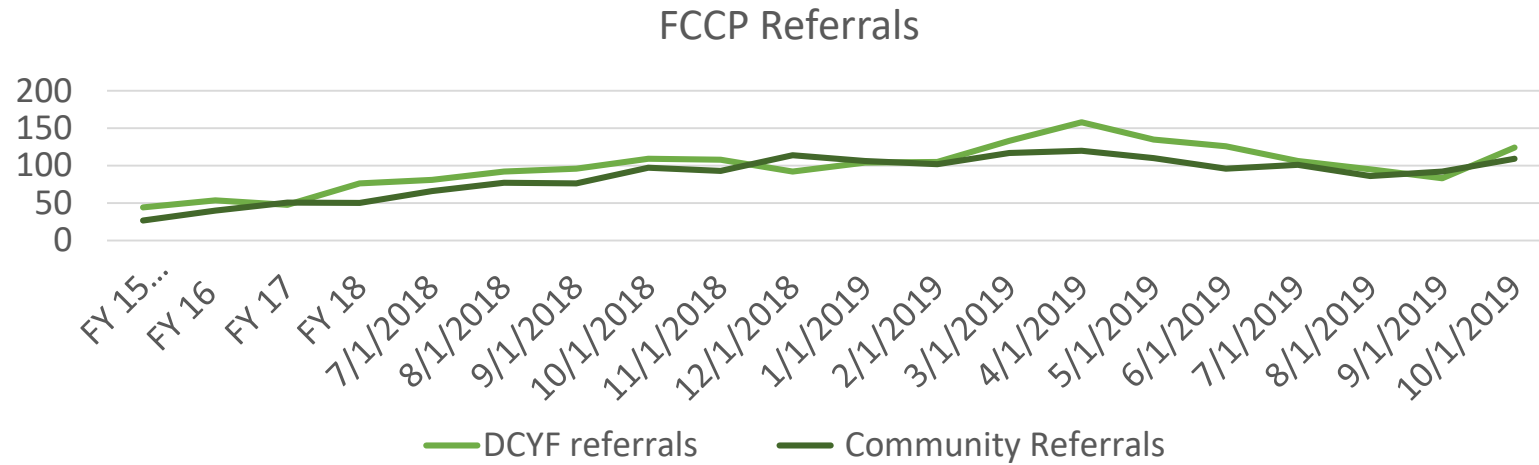


Aggressive budget assumptions related to placement were not achievable without investment in our community and dedicated, concentrated changes to internal department standards and practice

Right Response

Improving safety outcomes through community intervention, investigating and removing only when necessary

Family and Community Care Partnerships successfully serve families in need, preventing deeper involvement with DCYF



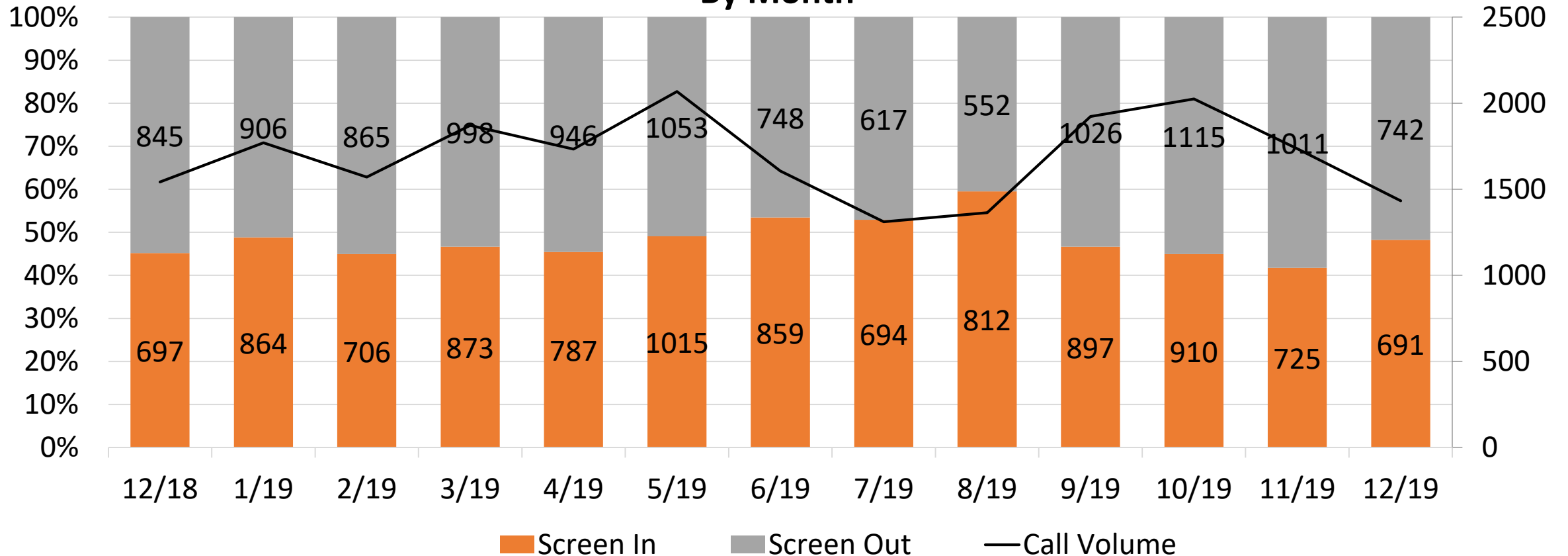
- Family and Community Care Partnerships (FCCPs) serve ~200 families a month
- 90+% of families served by FCCPs do not open to DCYF within the 6 months following service provision
- To further this goal, DCYF is currently engaged in:
 - Partnering more comprehensively with RIDOH's Family Home Visiting programs
 - Systematically assessing the needs and strengths of families referred to FCCPs to ensure we are serving families appropriately
 - Planning for the implementation of the Family First Preventative Services Act

Percent of Children who were discharged from the FCCP and Open to DCYF within 6 months of discharge, Full Historic FCCP Population



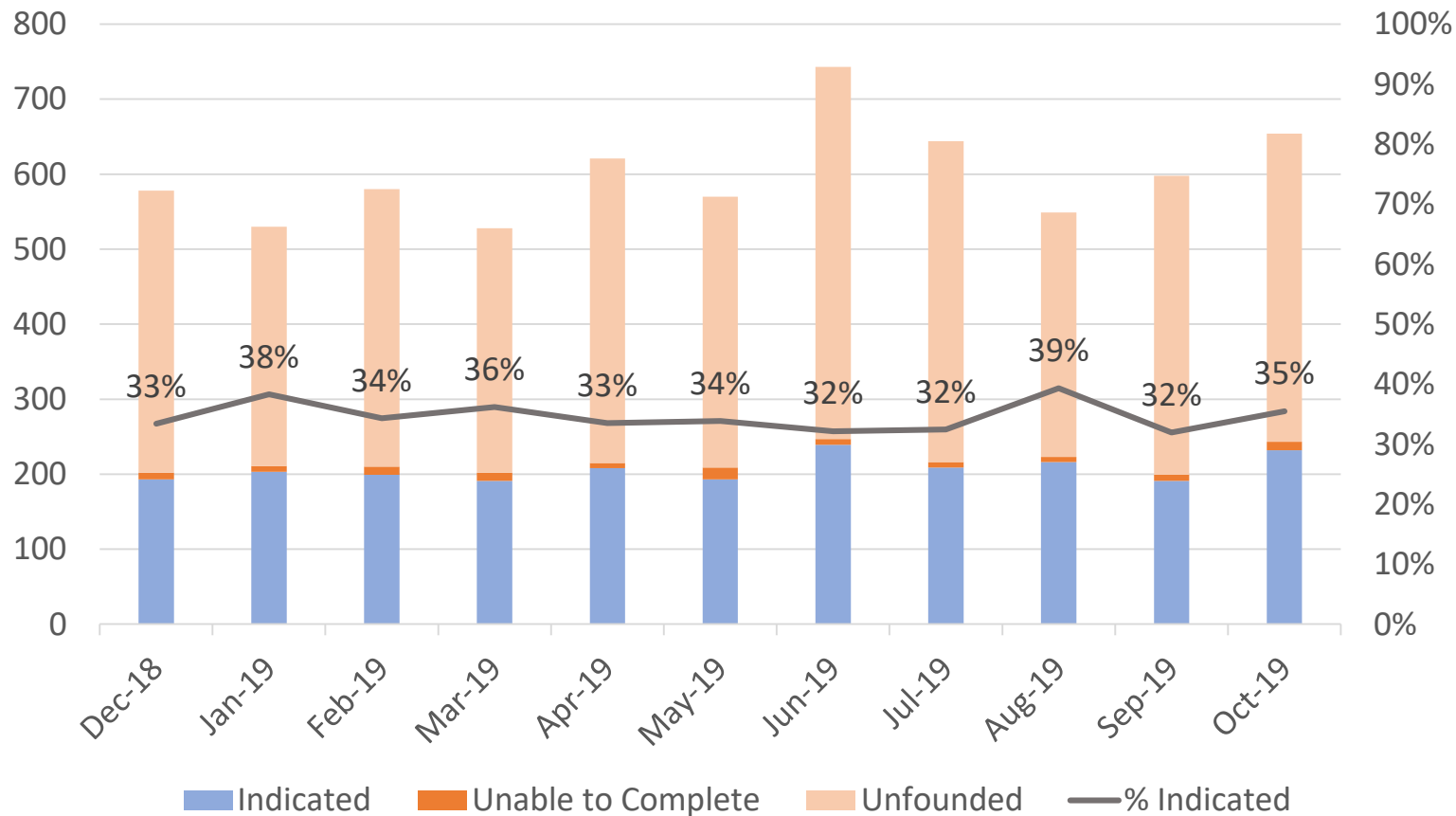
DCYF tracks call volume and screen-in rates through the front door

RI DCYF: Percent and Number of CPS Reports Screened In and Screened Out, By Month



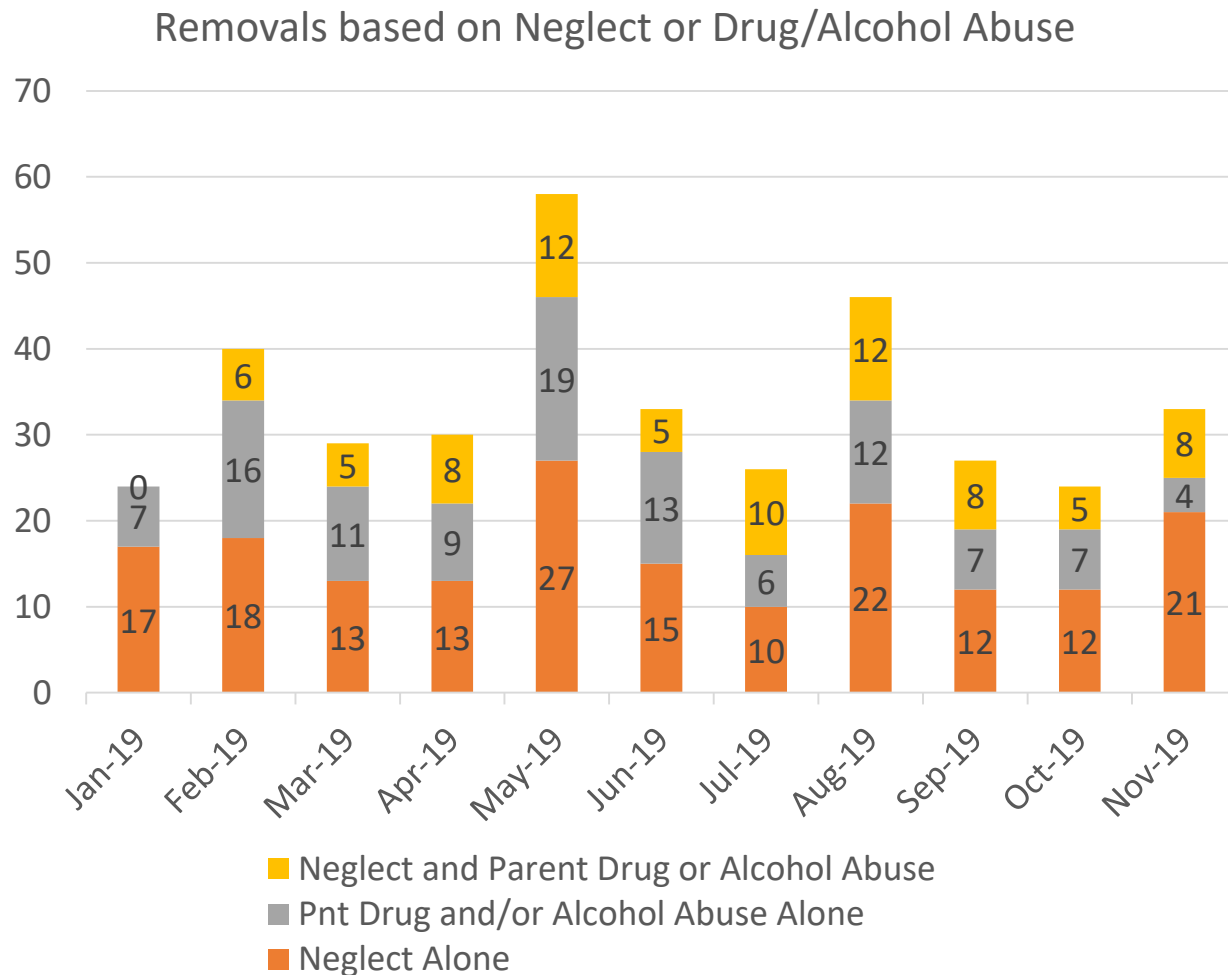
Only ~one-third of cases investigated lead to a finding; Over-screening means greater workload and trauma for families investigated

Screened-In Reports by Outcome, Excluding Reports Pending an Outcome



- DCYF must improve front-door screening, reducing investigative workload and increasing the capacity of investigators to connect families with impactful services
- In support of this goal, DCYF is currently engaged in:
 - Redesigning call-floor practices and technological tools
 - Retraining staff on the Structured Decision Making model
 - Conducting quality reviews of recorded calls.
 - Analyzing patterns in screening decisions across indicated and unfounded investigations

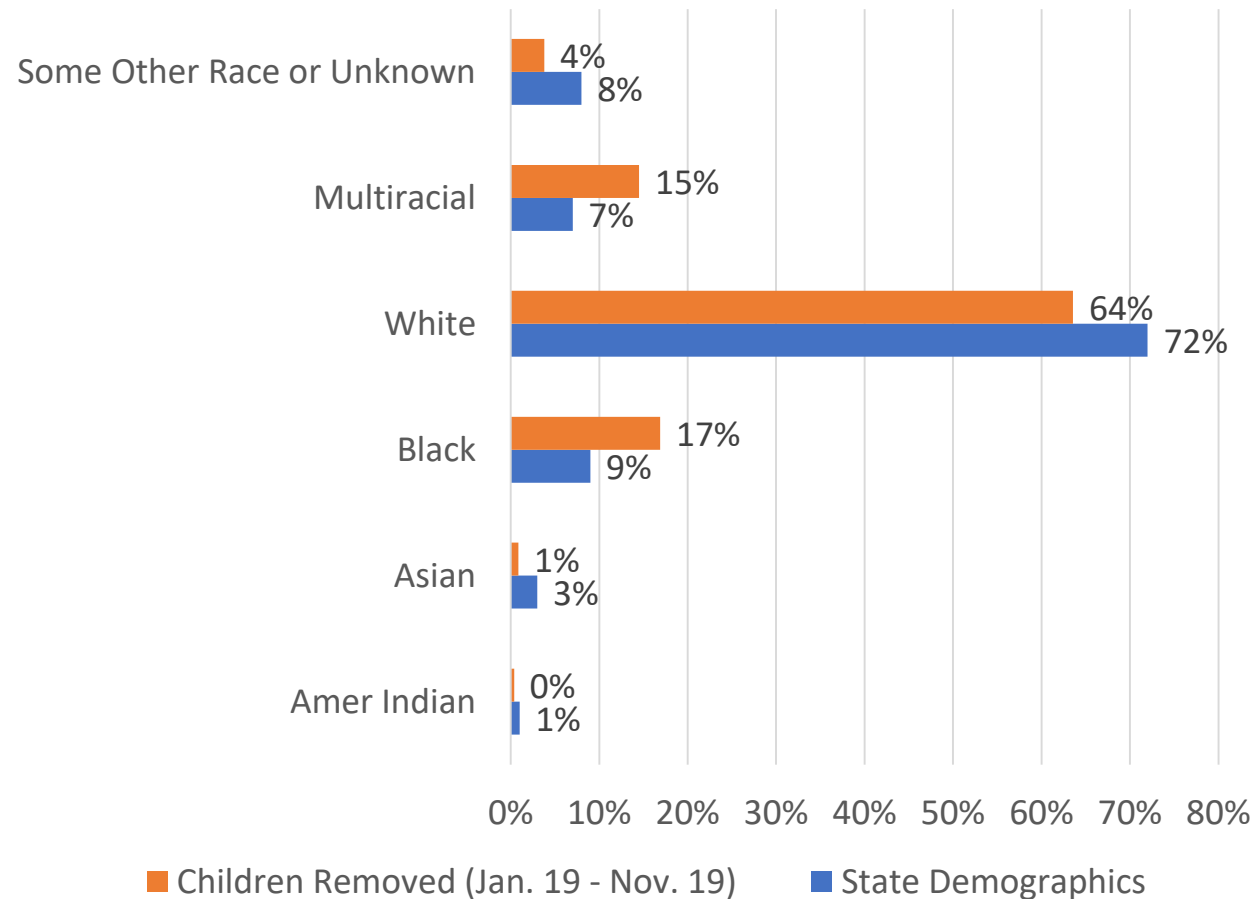
Addressing neglect and parental substance abuse could decrease overall removals by ~30 per month



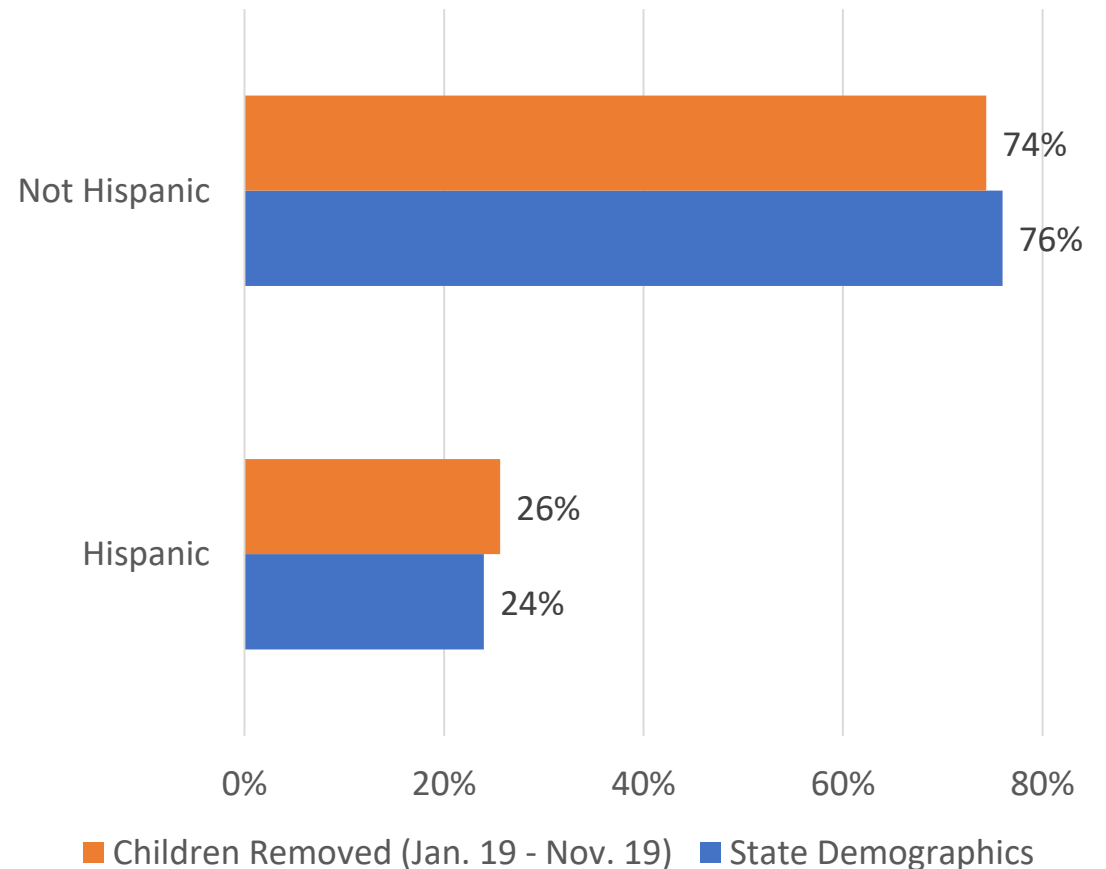
- DCYF has an opportunity to maintain more children in-home by engaging family supports and linking families in need with existing services.
- Removals tied to parental drug or alcohol abuse represent an opportunity to connect individuals to treatment and strengthen family supports
- In support of this goal, DCYF is currently:
 - Implementing the family functioning assessment in child protective services (CPS), an investigative tool that encourages more robust safety planning with family and community members before removal.
 - Partnering more comprehensively with the state's SUD service array, particularly BH Link.
 - Asking for additional 4 CPS workers in budget to meet recommended child welfare League of America staffing ratios to ensure investigators can take the time the new tool requires

Data show a greater propensity to remove black, Hispanic and multi-racial children than state demographics would suggest

Children Removed by Race



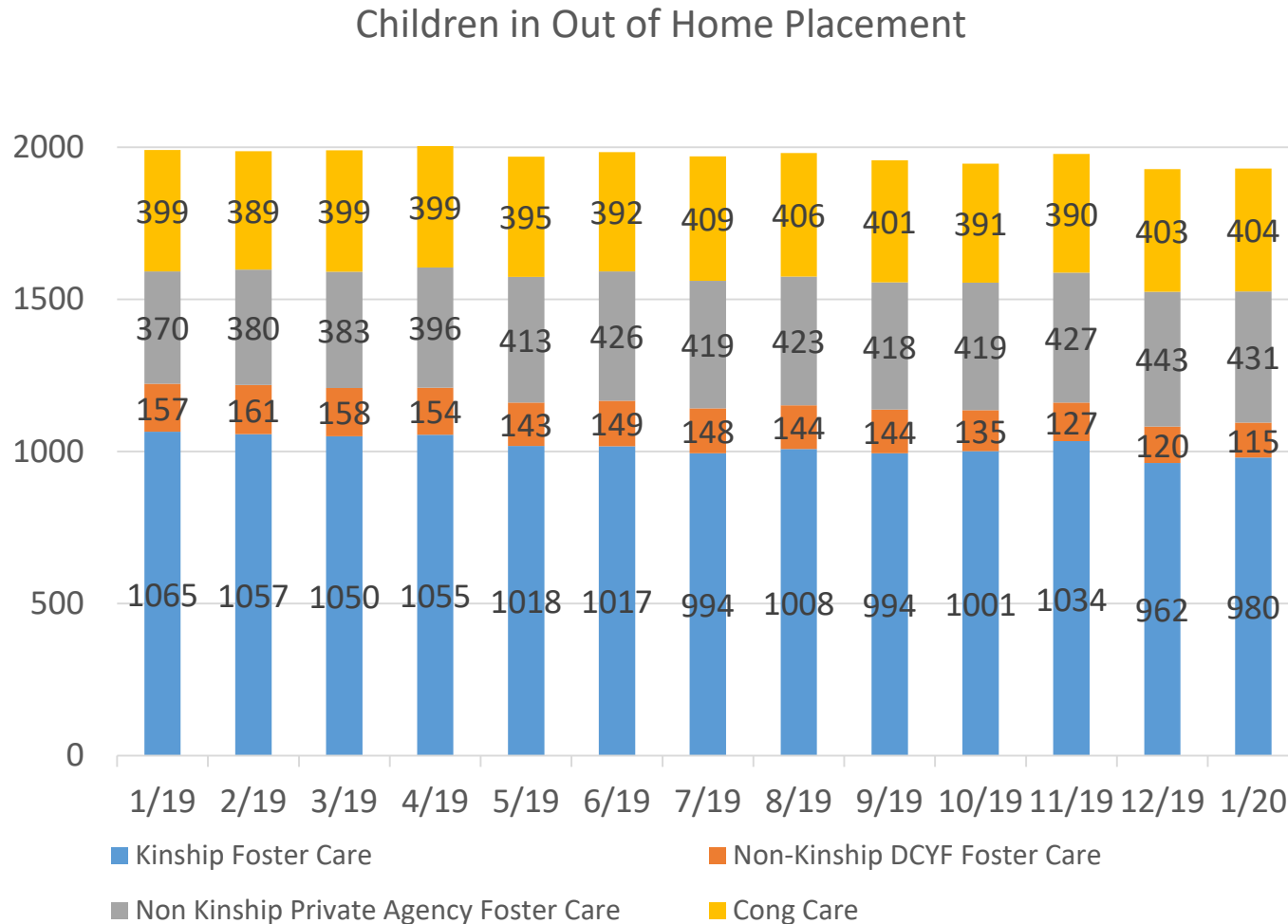
Children Removed by Ethnicity



Right Placement

Ensuring children removed from their homes are placed appropriately and paid for based on level of need

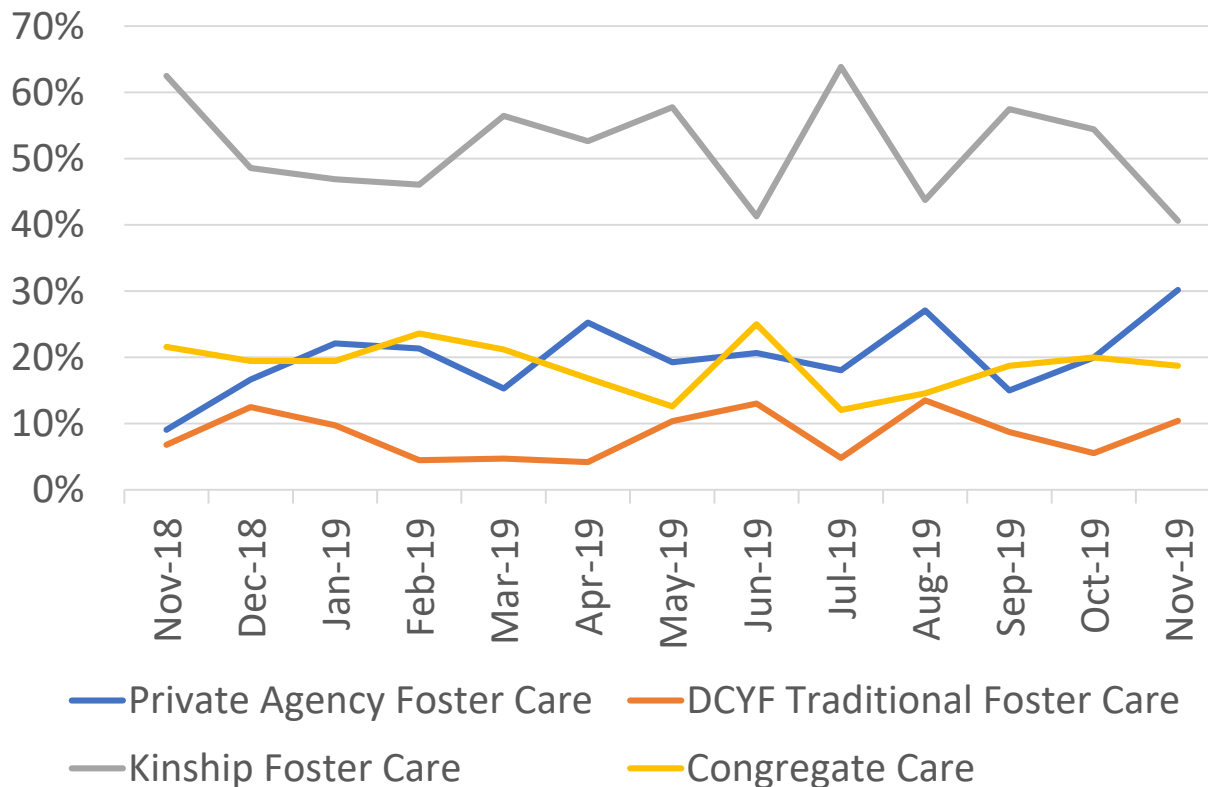
The number of children in out of home placement has leveled off and the placement type has shifted



- While the overall number of children in placement has leveled off, children in congregate care and private agency foster care has increased while the number of children in kinship and DCYF care has decreased.
- This represents a move towards more acute settings which are not appropriate for children who may not require clinical services.

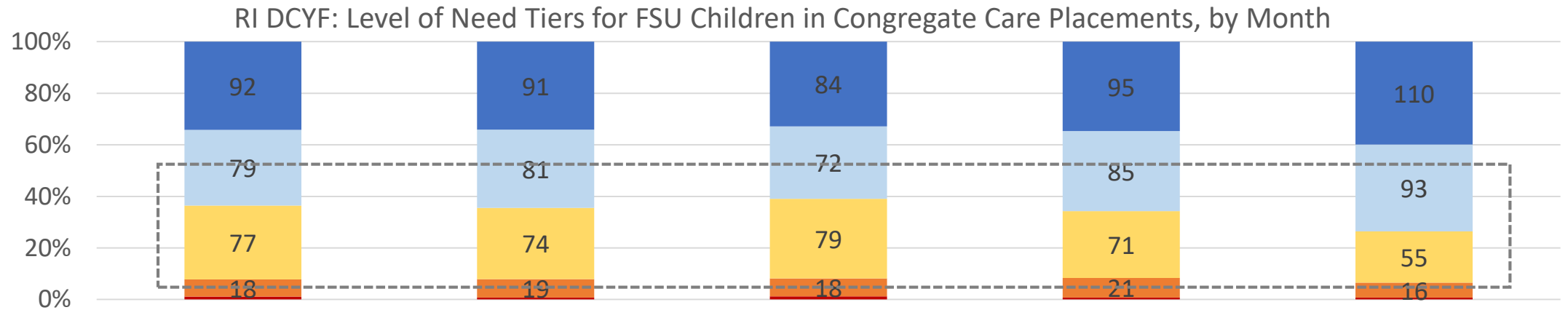
When DCYF has to remove a child, we should place according to the child's needs and circumstances

% of Removals by Initial Placement

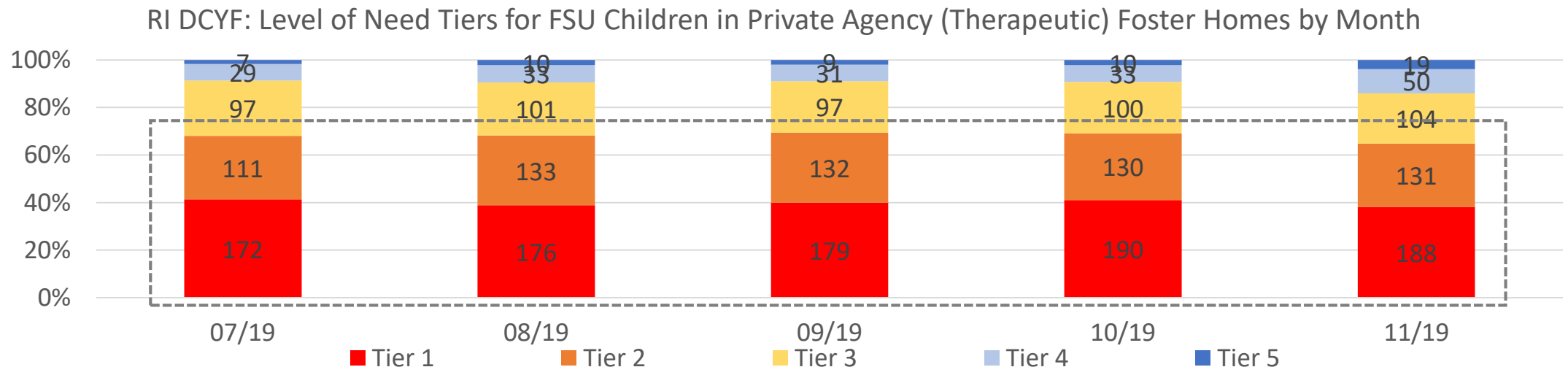


- Children are initially placed in congregate care and private agency foster care just as frequently as they are placed in DCYF foster care, and the decline in children initially placed in kinship care is a function of child needs, as well as the availability of placements.
- If DCYF does not have the capacity to engage with kin or recruit and retain foster families, we can expect a greater proportion of children in care to be in congregate care or private agency foster care.
 - DCYF currently only has budget for only one FTE dedicated to the recruitment of traditional foster homes

Congregate care and private agency foster care may not be appropriate settings for many of the children placed there



Source: RICHIST Rpt 748



Source: RICHIST Rpt 748

Our budget focuses on recruitment to ensure the right placements are available

- Recommend adding 14 addition FTEs to double the number of traditional foster care homes from 200 to 400 by the end of FY 2022
- Proper placement of children based on level of need is expected to generate a net savings of \$2.5M by properly placing children who are currently placed in congregate care and therapeutic foster homes.
 - DCYF recommends raising reimbursement rates for foster care families modestly for low–need children and significantly for families willing to take care of higher level of need children. Our budget request assumes a 50% increase to high level of need reimbursements to be paid directly to families.
 - Regardless of agency, DCYF will pay the same rate for foster care families
 - DCYF to work with private agency foster care providers beginning in January 2020 to renegotiate rates as appropriate and incentivize therapeutic settings

We are committed to setting and achieving our goals, starting with a 94% increase in licensed kinship families

3-month kinship licensing project from October to December 2019 launched to complete the licensing process of all kinship foster families that had been pending for more than 6 months AND to ensure that all new kinship homes be licensed within 180 days.

- The project included **203** kinship families that were pending licensure for more than 6 month and an additional **271** kinship families pending licensure for less than 6 months.
- **No Department standards were changed or removed as a part of this process.** We used the same standardized kinship licensing process and tools, developed with the Annie E. Casey Foundation, that DCYF has used for the last 1.5 years.
- **Over 100 individuals assisted with this project** – from DCYF’s divisions (Licensing, Family Services Unit, Juvenile Justice), Family Court, and other qualified outside contractors. All staff were provided training.

As a result of this project...

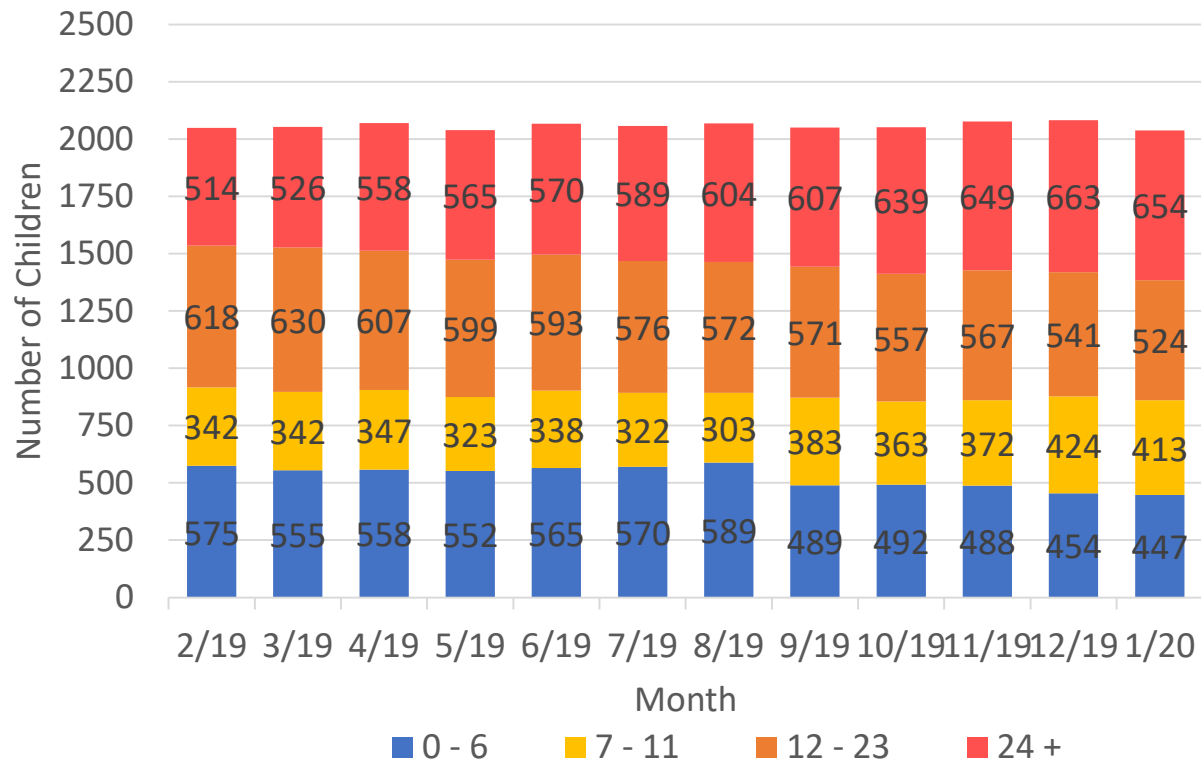
- The total number of licensed kinship families has **increased by 94%** (from 284 to 553)
- The number of kinship licenses pending for more than six months has been **reduced by 78%** (from 203 to 77, with 33 certified as un-licensable)
- The number of kinship licenses pending for less than six months has been **reduced by 22%** (from 271 to 211, with 2 certified as un-licensable)

Right Goal

Expediting sustainable permanency outcomes for children in care

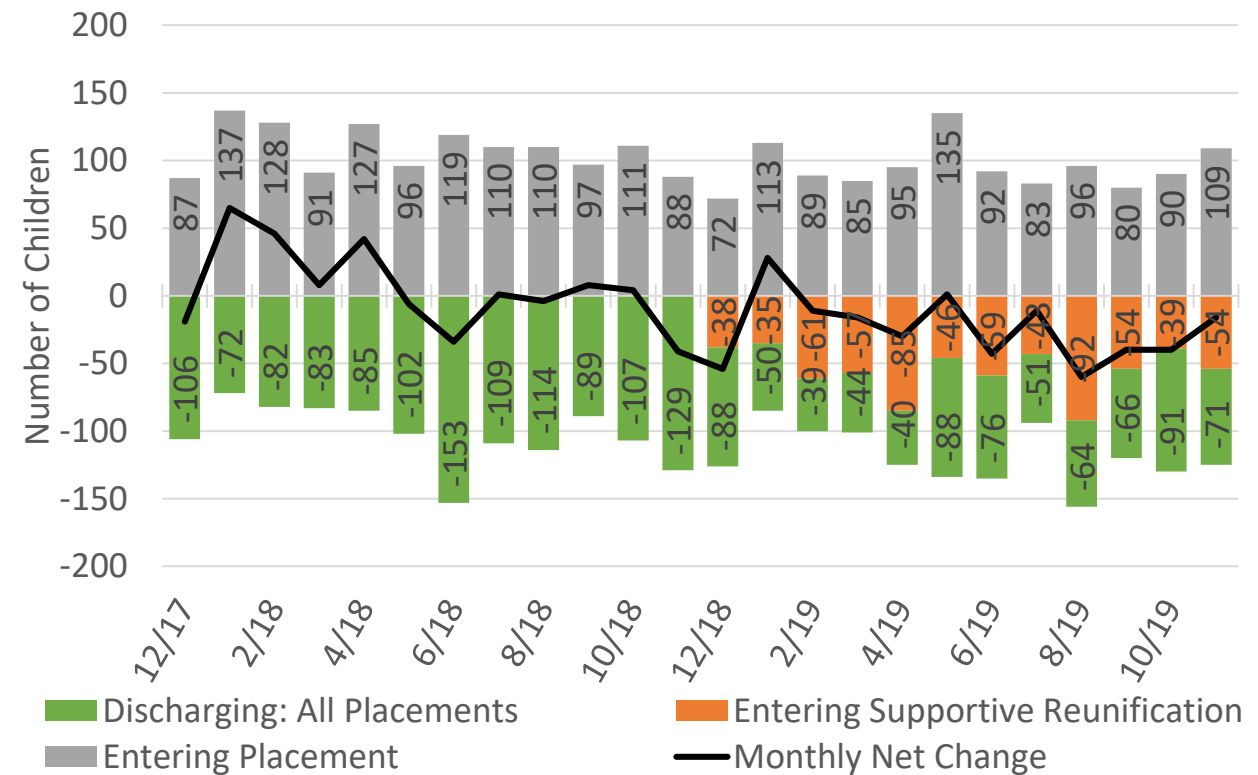
A large and growing portion of children in DCYF care have been there for 2+ years; discharges have slowed

RI DCYF: Number of Children in Placement by Length of Time Out-of-Home



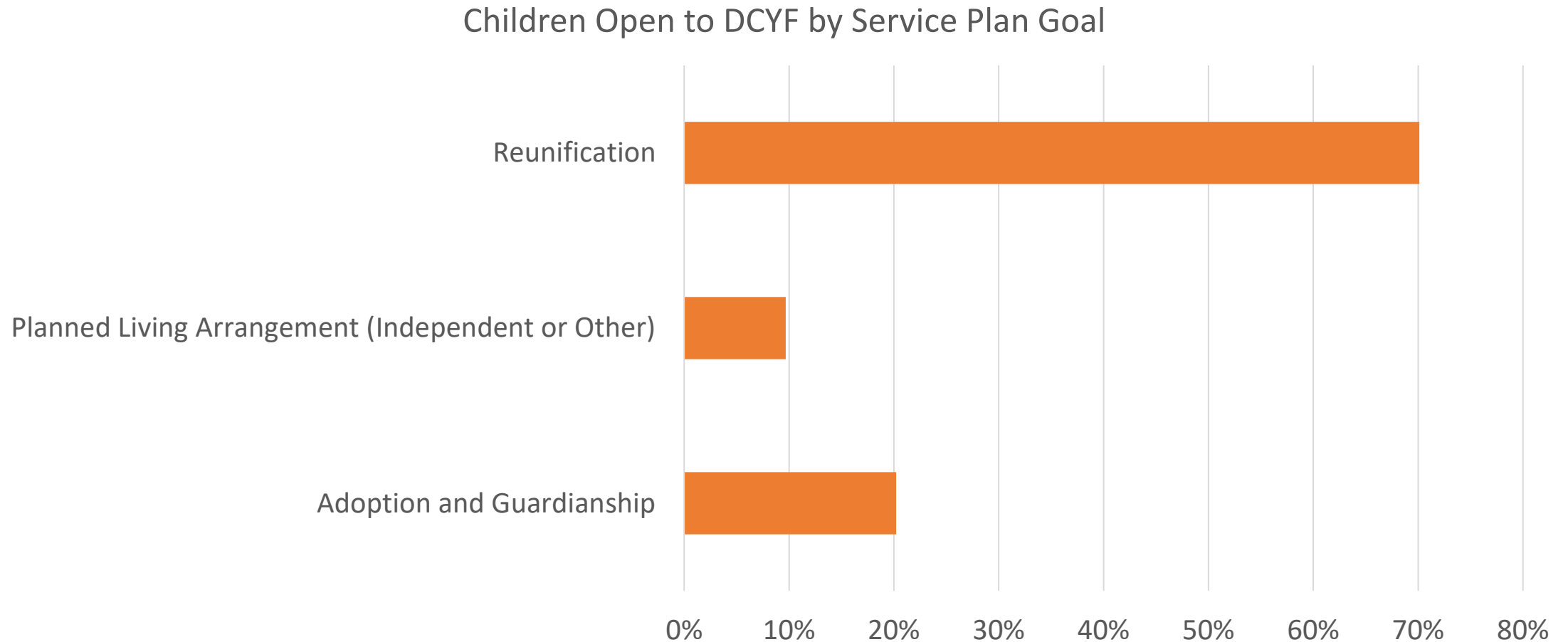
Source: RICHIST Rpt 546

RI DCYF: Number of Children Entering Placement, Discharging into Supportive Reunification, and Discharging from All Placements, by Month

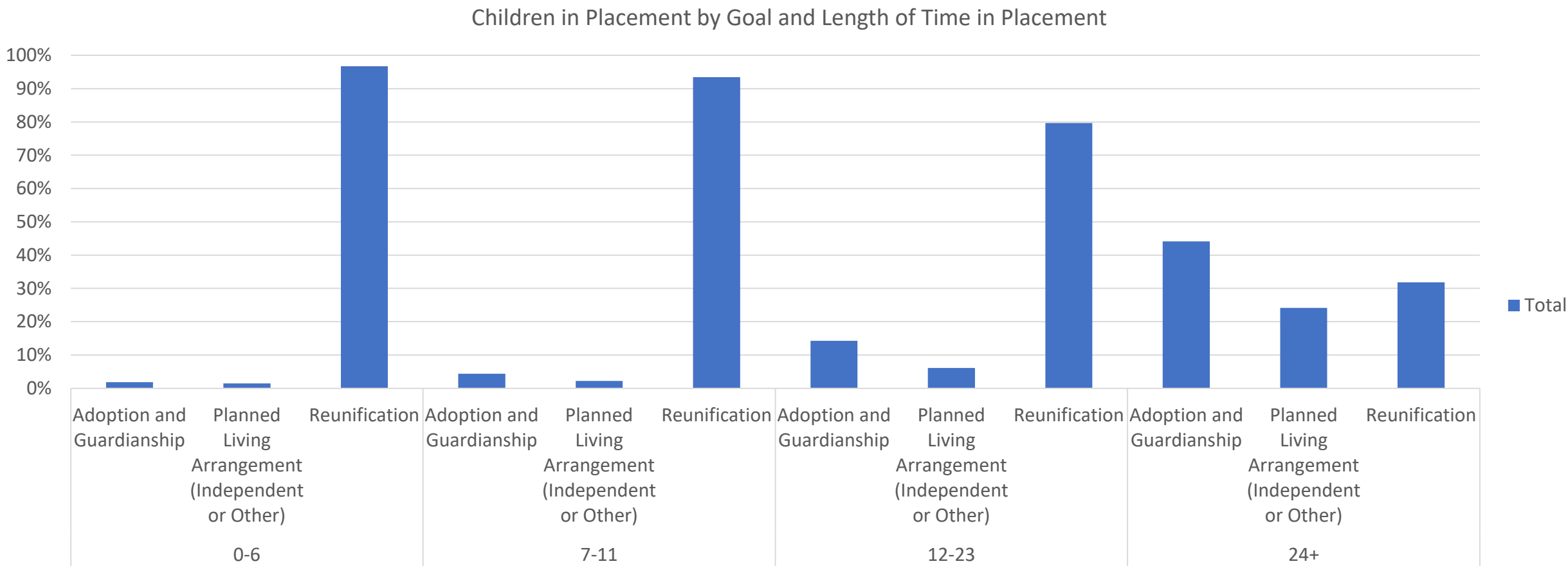


Source: Info Maker 749

The majority of children in DCYF care have a permanency goal of reunification



For children open to DCYF for 2+ years, adoption and guardianship is the most common permanency goal



DCYF has a number of promising initiatives to ensure children are moving to permanency as soon as possible

- **Family Services Unit Active Divisional Management** – DCYF has institutionalized a regular, data-driven meeting to review FSU performance. FSU is currently focusing on active service planning, timely service planning, TPR status, and length of stay in out of home placements. Since implementation, FSU has seen increases in active and timely service planning.
- **Ongoing Family Functioning Assessment** – As of November 2019, DCYF has implemented the Ongoing Family Functioning Assessment (OFFA), which serves as the Department's new service planning tool. The OFFA requires workers to identify the specific present or impending danger that requires a child to be placed out of home, and ties behavior change goals (as well as services) directly to those risk areas. The plan focuses on progress towards behavior change and mitigating any issues that would negatively impact child safety and well-being. DCYF anticipates that this clear, explicit connection between reasons for removal and service planning will encourage faster and safer reunification.
- **Permanency Reviews** – the Department is planning a focused effort targeting cases of children in care for 15 months or more without a TPR filed or granted for review and accelerated movement towards permanency.
- **Casey Family Programs** – Among other initiatives, Casey will be analyzing current barriers to permanency and recommend specific actions. This will include technical assistance to implement the recommendations.
- **Governor's Foster and Adoption Initiative** – DCYF will be partnering with the Governor's Office and ACF to recruit and support more foster and adoptive homes.

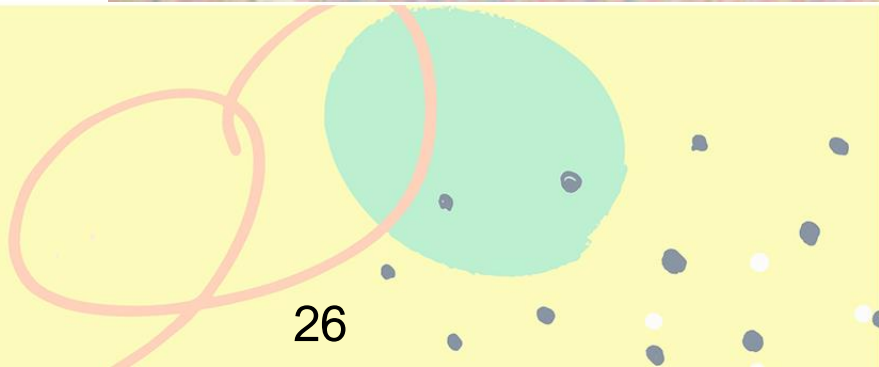


RI Pre-K Expansion 2020



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Current State of RI Pre-K

COMMITMENTS TO...

MIXED DELIVERY

- A mixed delivery model – where RI Pre-K classes are located in schools, child care centers, and Head Start agencies – helps ensure equitable access to Pre-K across the state

QUALITY

- RI is one of only 3 states to meet all 10 NIEER (National Institute of Early Education Research) requirements

COLLABORATION

- **State agencies:** identify and engage ways to serve high needs students
- **Outside agencies:** Measure quality, provide PD and technical assistance

CURRENT STATE: 2019-20

PUBLIC SCHOOL

+358 

CHILD CARE CENTERS

+414 

HEAD START

+648 

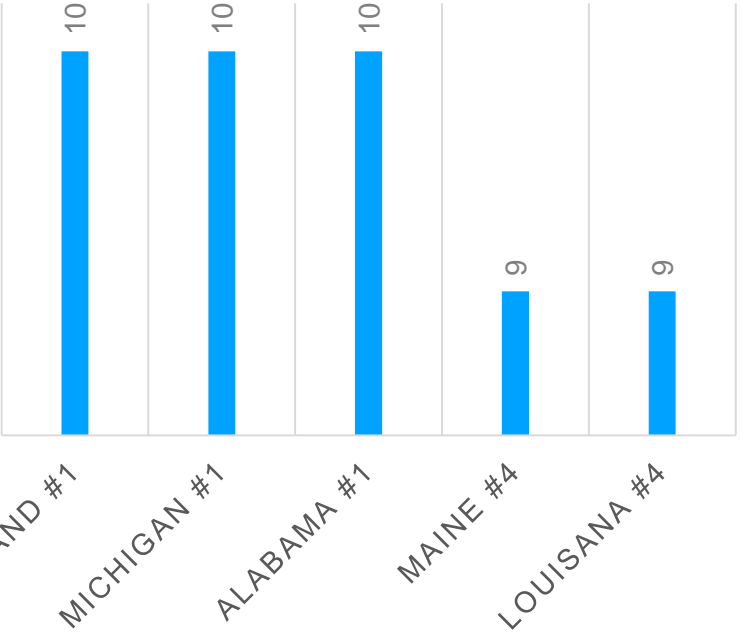
1420 **CURRENT TOTAL SEATS**

National Comparison by NIEER

(National Institute of Early Education Research)

RI is ranked #1 in **quality**!

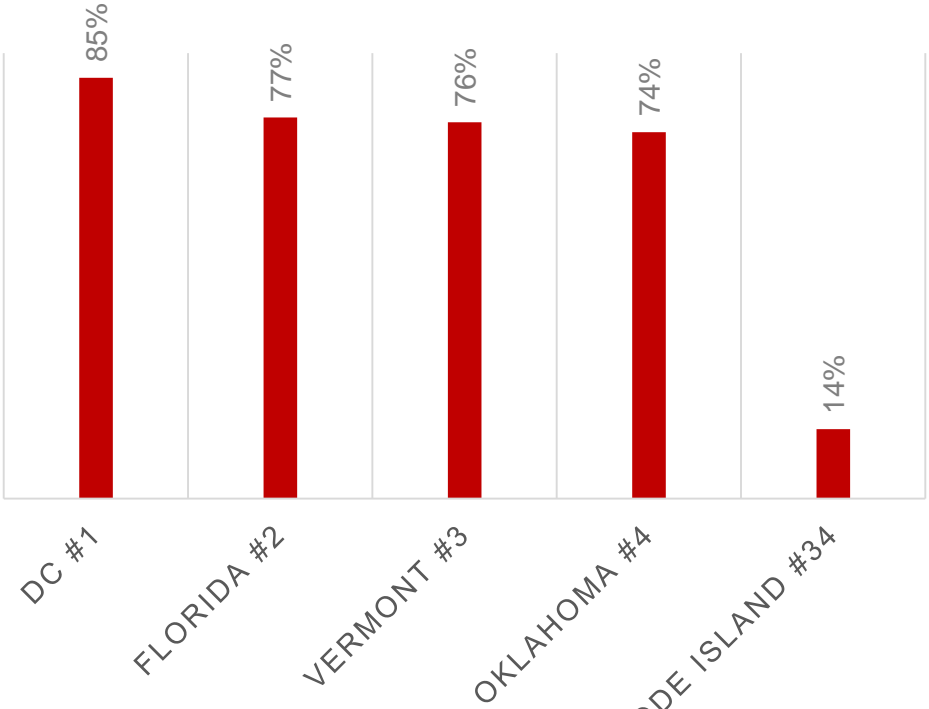
OF QUALITY STANDARDS SATISFIED



But is ranked #34 in **access**

Too many of our children are falling behind even before they start school.

% OF 4-YEAR-OLDS IN STATE PRE-K



Benefits of High-Quality Pre-K

Few state policies yield as overwhelming and obvious a return on investment as high-quality Pre-K:

- Early childhood is a foundational time for brain development, and high-quality Pre-K is crucial for building that foundation to promote lifelong success.
- More than 50 years of research has demonstrated that high-quality Pre-K has lasting academic advantages for ALL young children, including persistent boosts in social-emotional skills.
- The largest benefits go to those facing the toughest challenges, including MLLs, children with disabilities, and children living in poverty.
- Attending high-quality Pre-K is the greatest predictor of 3rd grade reading proficiency.

High-quality Pre-K returns **up to \$17** for every dollar invested

LESS need for special education services



GREATER high school graduation rates



HIGHER career earnings



LOWER adult incarceration rate



Financial Burden for Families



Child care is unaffordable for typical families in Rhode Island

- Infant care for one child would take **up 20.5% of a median family's income** in Rhode Island
- According to the U.S. Department of Health and Human Services (HHS), child care is affordable if it costs less than 7% of a family's income. By this standard, **only 6.6% of RI families can afford infant care**

Families with two children face an ever larger burden

- Child care for two children – a infant and a 4-year-old – costs **\$24,383 per year**. That's **51.8% more than average rent** in RI
- A typical family in RI would have to spend **36.4% of their income** on child care for an infant and a 4-year-old

Governor Raimondo's Vision: Achieve Universal Pre-K through expansion that is high-quality, equitable and cost-sustainable

OUTCOME

- **Double** 3rd grade reading proficiency by 2025

OUTPUT

- **Expand** access to high-quality pre-k by adding seats until we achieve universal (7,000 seats)

OBJECTIVES

- **Maintain** high-quality
- **Employ** a mixed-delivery model of classrooms, child care centers, and Head Start centers
- **Enhance** the birth to 5-year-old system

FUTURE STATE: 2020-21

CURRENT TOTAL SEATS

1420

PDG B-5 RENEWAL GRANT \$3M Federal Funds

+300

FY21 Governor's Proposed Budget \$4.5M

+450

2170 **TOTAL PROPOSED SEATS**

**More than 50% increase in
seats over last year!**

Focus on Facilities

THE NEED

- In 2019, LISC RI conducted an **Early Learning Facilities Needs Assessment** which points to the lack of safe, quality spaces available to house early learning programs across Rhode Island.
- While many community-based early learning providers in RI express interest in improving quality, opening new facility spaces and/or operating additional programs, **88% lack the financial resources to do so.**

THE SOLUTION

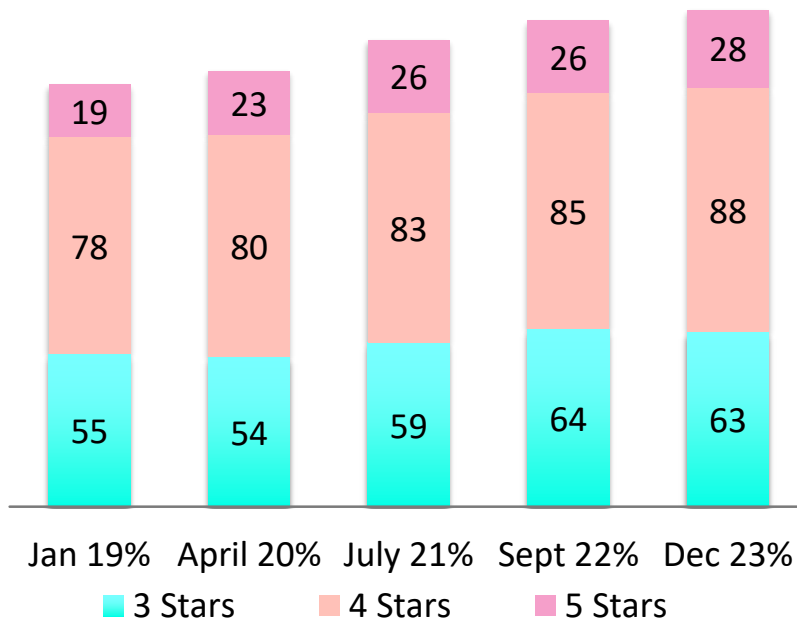
- The Governor is proposing a **general obligation bond for \$15M** for Early Learning Facilities in RI, a part of the Affordable Housing Bond (similar to Massachusetts); if approved will be up for vote in Fall 2020.
- The bond would provide \$12M for the development of new spaces (including construction and renovation), \$2M for facilities improvement grants (for existing facilities), and \$1M for technical assistance, training and administration.
- We will also be awarding **facilities planning grants** using PDG B-5 Renewal grant funds. These grants can be used for predevelopment activities (such as architect services) that are essential for planning a facilities project.



Investing in Rhode Island's B-5 System

Tiered Reimbursement Rates are Working to Increase Quality in RI

2019: # of providers at 3-5 star rating in BrightStars



The Governor is proposing to increase investments in tiered reimbursement for FY21:

- Additional **\$1.8M** for infant/toddler rates and **\$2.1M** for preschool rates
- This increase will ensure 1 star infant/toddler providers are reimbursed at the 25th percentile of the market rate and rates will increase up to the 75th percentile for 5 star providers; this increase will get us halfway there for preschool rates
- Without this investment we will continue to be on corrective action from ACF and at risk of being fined

PDG B-5 Renewal Grant

RI was just awarded \$27M over 3 years!

- This award is a renewal of a one-year \$4.2M grant the state received in 2019 to support planning activities
- RI was one of only 20 states to receive this grant
- Funding will be used for:
 - Additional seats for early childhood programs, including FHV, child care and RI Pre-K
 - Family support programs through the HEZs
 - High-quality PD for early childhood professionals
 - Enhancing data systems
 - Other B-5 system improvements



Funding Efficiencies & Sustainability

We recognize the need to identify sustainable funding strategies to ensure lasting expansion of RI Pre-K. We are already implementing **3 strategies**:

BLENDING HEAD START FUNDING

- This year we started blending federal Head Start funding with state pre-k funding
- 18 RI Pre-K classrooms are using this model
- This strategy allowed us to add 117 federally funded seats to RI Pre-K in 2019-20

LEVERAGING FEDERAL FUNDING

- Our state agencies have collaborated to submit several successful competitive grant awards including:
 - \$4.2M PDG B-5 planning grant
 - \$27M PDG Renewal Grant
- These grants are allowing us to add more seats as well as staff support and infrastructure

UTILIZING THE FUNDING FORMULA FOR LEA PRE-K

- We plan to add the current 358 RI Pre-K seats in public schools to the funding formula
- The first year of every LEA-based RI Pre-K classroom will be 100% state funded
- Inclusion in the funding formula is voluntary; districts opt-in
- This will ensure seats are sustainably funded with both state and local funding

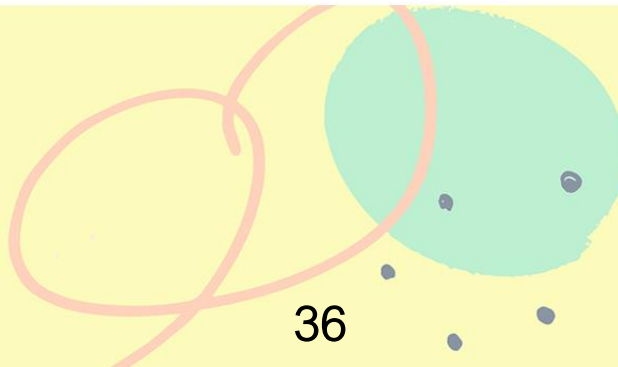
QUESTIONS?

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Public Comment